

Bride/Groom Names: _____ **Wedding Date:** _____

Venue: _____ **Quote Date:** _____

DJ You Met With: _____ **Insurance Required:** Yes No

Services Needed (check all that apply): **Ceremony** **Cocktail Hour** **Reception**

Number of Setups: _____ **Number of Guests:** _____

Start/Finish Time: _____ **Number of Hours:** _____

Up Lights: Yes No **If Yes, How Many:** _____

Sub Speakers: Yes No **If Yes, How Many:** _____

Monogram: Yes No **Dance Floor Lights:** Yes No

Additional Equipment: _____

Final Quote: _____

